

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

August 5, 2005

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Noodles & Company, 2801 Pine Lake Road requesting that Edward Lynch be approved as the manager of the class I liquor license.

Background information on the applicant is as follows:

Edward Lynch was born in Philadelphia, Pennsylvania. He attended La Salle University graduating in 1988.

Edward Lynch employment history is as follows:

Manager, Noodles & Company	Lincoln, NE.
Manager, Melting Pot	Omaha, NE.
Manager, Aaramark	New Jersey.
Manager, Lafonda	Omaha, NE.
Manager, Billy Frogs	Omaha, NE.
	Manager, Melting Pot Manager, Aaramark Manager, Lafonda

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

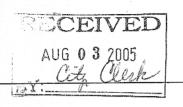


Business (DBA) Noodles & Co
Manager Owner Other
Name: Edward Lynch
US Citizen? (Yes) No
Has applicant ever been cited for liquor law violations? No Yes Explain
Does applicant have an interest in another liquor license? No Yes Explain
Is spouse qualified to hold a license? Yes No N/A
How is applicant if not an owner to be paid? (Salary) Hourly
How many hours will applicant be at the establishment?50†
Any other employment No Yes, explain
Any previous experience with a liquor license? Yes No
Any criminal convictions? No Yes Comments
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? (No) Yes  Comments
(1) Photo (1) Records Check (1) References
Comments

Liquor License Investigation

Interview Date 8 / 4 / 05





@ 5 30

STATE OF NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION Hobert B. Rupe

> Executive Director 301 Centennial Mall South, 5th Floor

P.O. Box 95046 Lincoln, Nebraska 68509-5046

Phone (402) 471-2571 Fax (402) 471-2814

TRS USER 800 833-7352 (TTY) web address: http://www.nol.org/home/NLCC/

A5-085225

August 2, 2005

City Clerk of Lincoln City/County Building 555 S 10 Street Lincoln, NE 68508

RE: Manager Application Submittal

Dear Sir/Madam:

The corporation The Noodle Shop, Co – Colorado Inc has submitted the enclosed Application for Corporate Manager. The establishment has the following pending liquor license(s) Class I #67838. The applicant's name is Edward J Lynch.

Please present this application to your City/County Council and return the results of the action taken to our office. If you have any questions or comments, please give me a call at (402) 471-4881.

Sincerely,

Jackie B. Matulka Licensing Division

Enclosure

Page 1 of 4 Application for Corporate Manager

\*Must Be A Nebraska Resident\*

Please submit in Triplicate

301 Centennial Mail So., Lincoln NE 688	PO Box 95046 509 Web address: http://www.nol.org/home/NLCC/
Phone: (402) 471-2571 Fax: (402) 471-2814	Web address: http://www.notorg/nomentace/
Required areas marked by a red asterisk (*)	
LIQUOR LICI	ENSE INFORMATION
Name of Licensed Corporation	Class & License number
The Noodle Shop, Co Colorado, Inc. *	Class J, # TBD
Total Name of the seal December	Pending I# 1078
Trade Name of Licensed Premise  Noodles & Company  *	1078
, resource a company	C .
Street Address of Licensed Premise	City County
2801 Pine Lake Road *	Lincoln * Lancaster *
Signature of Corporate President/CEO:	Bellen
	TION (MUST BE 21 OR OVER)
APPLICANT INFORMA Full Name (Last, First, Middle, Maiden)	TION (MUST BE 21 OR OVER)  Sex * Social Security Number *
APPLICANT INFORMA Full Name (Last, First, Middle, Maiden)	Sex * Social Security Number
APPLICANT INFORMA Full Name (Last, First, Middle, Maiden) Lynch, Edward J *	Sex * Social Security Number
APPLICANT INFORMA Full Name (Last, First, Middle, Maiden) Lynch, Edward J *	Sex * Social Security Number *
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden)  Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni	Sex * Social Security Number *
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden)  Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni	Sex * Social Security Number  F M  Social Security Number  *  City County
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden)  Lynch, Edward J  Place of Birth	Sex * Social Security Number F M +
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden)  Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni	Sex * Social Security Number  F M  Social Security Number  *  City County
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden) Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni  Home Street Address  1714 North Linden Street  *	Sex * Social Security Number  F M  Social Security Number  *  City  County  Wahoo  *  Saunders  *
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden) Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni  Home Street Address  1714 North Linden Street  *  State  Zip Code	Sex * Social Security Number  F M  Social Security Number  *  City County  Wahoo * Saunders *  Home Telephone Number
APPLICANT INFORMA  Full Name (Last, First, Middle, Maiden) Lynch, Edward J  *  Date of Birth  Place of Birth  Philadelphia, Peni  Home Street Address  1714 North Linden Street  *  State  Zip Code  NE  *	Sex * Social Security Number  F M  Social Security Number  *  City County  Wahoo * Saunders *  Home Telephone Number

Are You	ı Married? *	Yes   No   If Yes, Y	ou must complete	e the followin	ng:	
	SPC	OUSE'S INFORMAT	ION (IF NOT	MARRIE	D INDICATE)	
	me (Last, First, M , Anne Francis (I			bonneric at	Social Security Numb	er
Driver	rs License Number	Spl	N	State E	Date of Birth	
Place of Grand	f Birth Island, Nebrask	a				
Has any charge. violation and more	yone who is a part Criminal charge r in of a local law, o nth of the convicti	LY. Answer completely and y to this application, or their means any charge alleging a rdinance or resolution. List ion or plea. Also list any chindividual's name.	ir spouse, <u>ever</u> been a felony or misden at the nature of the	neanor violat charge, when	ion of a federal or state the charge occurred	te law; or a and the year
* 2. Have a second of the seco	ve you or your spo t premise give lice No	ouse ever made application onse number and date.	for any liquor lice	ense or manag	ger for any liquor lice	nse? IF YES,
* 3. Hav VYes	ve you or your spo	ouse ever made a compromi	ise settlement for	violation of s	uch laws?	
License's	you, as a manager? a Liquor Control A	, have all the qualifications Act (§53-131.01)	required by any p	person entitle	d to hold a Nebraska l	Liquor
* 5. Hav applicati Yes	ve you filed finger on? No	print cards and PROPER F	EEES (if check, m		e NE State Patrol), wi	th this

RESIDENCES FOR P	PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE				
Wahoo, Nebraska	Year From To ant: City & State    2004   2005     2004   2005				
Toms River, New Jersey	Year From To ant: City & State    2002   2004   se: City & State   2002   2004				
Bellevue, Nebraska	Year From To  Int: City & State  1996   2002    se: City & State  1996   2002				
	Year From To nt: City & State se: City & State				
EMPLOYERS - LIST LAST TWO EMPLOYERS					
Name of Employer Noodles & Company Name of Supervisor Chris Mouttet	Year From To 2005 Present  Telephone Number 402-319-5956				
Name of Employer  Aaramark  Name of Supervisor	Year From To 2002 2004 Telephone Number				

Ken Milko

908-541-4593

## PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE

STATE OF NEBRASKA )

OUNTY OF SS

The above individual(s), being first duly sworn upon eath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Signature of Applicant

i leet

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this day of JUNE

Subscribed in my presence and sworn to before me this

21 day of June 2005

Notary Signature & Seal

Notary Signature & Seal

CHARLOTTE S. BALLARD
MY COMMISSION EXPIRES
July 13, 2007

Verify and Print



CHARLOTTE S. BALLARD MY COMMISSION EXPIRES July 13, 2007

> FORM 35-4013 REV. 2/01

## NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Canhyuch
Signature of Spouse

RECEVED

JUL 1 4 2015

SUBSCRIBED in my presence and sworn to before me this

TTE S. BALLARD

NEBRASKA LIQUOR CONTROL COMMISSION

, A.D., 200\$

CHARLOTTE S. BALLARD
MY COMMISSION EXPIRES
24/y 18, 2007

harlotto J-Dallard
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Signature of Licensee/Applicant

Print Name of Licensee/Applicant

Soward Lynd

SUBSCRIBED in my presence and sworn to before me this

day of

, A.D. <u>2005</u>

1

Signature of Notary Public

CHARLOTTE S. BALLARD MY COMMISSION EXPIRES July 18, 2007

FORM 35-4178 REV 2/01